FORM D 3235-0076 **OMB** Number April 30, 2008 **Expires: UNITED STATES** RECEIVED Estimated average burden hours per SECURITIES AND EXCHANG ......16.00 Washington, D.C. 2 2006 FORM D SEC USE ONLY NOTICE OF SALE OF S Serial PURSUANT TO REGUL. DATE RECEIVED SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Eoston Ship Acquisition LLC Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6) ☑ ULOE ☐ Amendment Type of Filing: Mew Filing A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Mame of Issuer (☐ check if this is an amendment and name has changed, and indicate change.) Boston Ship Acquisition LLC Telephone Number (Including Area Code) (Number and Street, City, State, Zip Code) Address of Executive Offices c/o Taglich Brothers, Inc. 405 Lexington Avenue, 51st Floor, New York, NY 10174 800-383-8464 Telephone Number (Including Area Code) (Number and Street, City, State, Zip Code) Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business: Holding Company. Type of Business Organization ☑ other (please specify): limited liability company ☐ limited partnership, already formed corporation already formed ☐ limited partnership, to be formed ☐ business trust Month Year □ Estimated ☑ Actual 0 6 Actual or Estimated Date of Incorporation or Organization: 0 | 8 | (Enter two-letter U.S. Postal Service abbreviation for State: Jurisdiction of Incorporation or Organization: CN for Canada; FN for other foreign jurisdiction) INANCIAI GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is

OMB APPROVAL

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predicated on the filing of a federal notice.

law. The Appendix to the notice constitutes a part of this notice and must be completed.

A BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
Enter promoter of the issuer if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or  Managing Partner
Full Name (Last name first, if individual) TAGLICH BROTHERS.
Business or Residence Address (Number and Street, City, State, Zip Code) 405 Lexington Avenue, 51st Floor, New York, NY 10174
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner
l'ull Name (Last name first, if individual) DRISCOLL, JOSEPH E.
3usiness or Residence Address (Number and Street, City, State, Zip Code) /o Taglich Brothers, Inc., 405 Lexington Avenue, 51 <sup>st</sup> Floor, New York, NY 10174
Check Box(es) that Apply:
Full Name (Last name first, if individual) MCFALL, THOMAS A.
Business or Residence Address (Number and Street, City, State, Zip Code)  Oo Taglich Brothers, Inc., 405 Lexington Avenue, 51st Floor, New York, NY 10174
Theck Box(es) that Apply: ☑ Promoter ☑ Beneficial Owner ☑ Executive Officer □ Director □ General and/or  Managing Partner
Full Name (Last name first, if individual) PARK, STEVEN G.
Business or Residence Address (Number and Street, City, State, Zip Code)  /o Taglich Brothers, Inc., 405 Lexington Avenue, 51 <sup>st</sup> Floor, New York, NY 10174.
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or  Managing Partner
Full Name (Last name first, if individual) SCHROEDER, ROBERT C.
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Taglich Brothers, Inc. 405 Lexington Avenue, 51st Floor, New York, NY 10174
Check Box(es) that Apply: ☑ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or  Managing Partner
Full Name (Last name first, if individual) TAGLICH, ROBERT F.
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Taglich Brothers, Inc. 405 Lexington Avenue, 51st Floor, New York, NY 10174
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

heck Box(es) that Apply:	Promoter	eneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
ull Name (Last name first, if i	ndividual)				
usiness or Residence Address	Number and Stre	eet, City, State, Zip	Code)		
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Full Name (Last name first, if	individual)				
Business or Residence Address	S (Number and Street	eet, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter   Be	eneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Stro	eet, City, State, Zip	Code		

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1. Has	the issuer s	old, or doe	s the issuer								•••••	🗆 🗹
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2. Wha	t is the min	imum inve	stment that	will be ac	cepted fror	n any indiv	vidual?				\$ <u>\$</u>	10,000.00
												Yes No
3. Does	s the offeri	ng permit j	oint owners	ship of a si	ngle unit?.							🗹 🗆
.1 Ente	r the inform	nation requ	ested for ea	ach person	who has be	een or will	be paid or	given, dire	ctly or indi	rectly, any	commissio	n or similar
remi	meration fo	r solicitati	on of nurch	asers in co	nnection w	ith sales of	f securities	in the offer	nng. It a p	erson to be	: iisted is ai	1 associated
perso	on or agent	of a broke	r or dealer	registered	with the SE	C and/or v	vith a state	or states, li	st the name	e informati	on for that	er. If more
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Name o	f Associate	d Broker o	r Dealer									
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ..... ☐ Common ☐ Preferred Convertible Securities (including warrants).... Partnership Interests.... \$ 3,743,330.00 Other (Specify: Membership Interests)..... Total..... \$ 3,743,330.00\_ Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0: if answer is "none" or "zero." Number Aggregate Dollar Amount Investors of Purchases 3,643,330.00 Accredited Investors ..... Non-accredited Investors ..... Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of offering Sold Rule 505..... Regulation A..... Rule 504..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs ..... 5,000.00 Legal Fees ...... 50,000.00 Accounting Fees ..... Engineering Fees..... Sales Commissions (specify finders' fees separately) ...... 5,000.00 Other Expenses (identify) Filing Fees and Miscellaneous.....

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$<u>3,683,270.00</u>

60,000.00

Total.......

C. OFFERING, PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proceeds to each of the purposes shown. If the amount for any purpose the box to the left of the estimate. The total of the payments I to the issuer set forth in response to Part C - Question 4.b above	is not known, furnish an listed must equal the adju	estii	mate and check		
				Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees	***************************************		\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of machinery and e			\$	_ 🗆	\$
	Construction or leasing of plant buildings and facilities			\$		\$
	Acquisition of other businesses (including the value of securi- offering that may be used in exchange for the assets or securi-	ties involved in this ties of another issuer	_		-	e es (es 370.00
	pursuant to a merger)	***************************************		\$		\$ <u>\$3,683,270.00</u>
	Repayment of indebtedness			\$		\$
	Working capital (Available for Investment)			\$	_	\$
	Other (specify):			S		\$ \$
				\$	_	\$ <u>3,683,270.00</u>
	Column Totals		Ц	\$	_	3,085,270.00
	Total Payments Listed (column totals added)	•••••		✓ \$ <u>3,683</u> ,	270.00	
			107113051			
	10 HHD	marie atenantiana				
C. 11	s issuer has duly caused this notice to be signed by the undersowing signature constitutes an undertaking by the issuer to fus staff, the information furnished by the issuer to any non-ac	irnish to the U.S. Secur	mes	and exchange co	шпром	n, upon written reques
		Signature	$\overline{}$	/ /	Date:	1. 1.
В	ston Ship Acquisition LLC	1 dt C	C	<u> </u>		127/06
Na	ame of Signer (Print or Type)	Title of Signer (Print 6	rıyj	pe)		•
Ro	obert C. Schroeder	Manager				
						•
	A	TTENTION				
	Intentional misstatements or omissions of fact	constitute federal ci	rim	inal violations.	(See 1	8 U.S.C. 1001.)
	THEHITOHAI IMPOSTATEMENTO OF ORMOSTORIO OF FACE	~~				

## Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions No of such rule? $\square$ See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on 2. Form D (17 CFR 239.500) at such times as required by state law.

- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the 3. issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Boston Ship Acquisition LLC	Signature Roll College	Date: 9 / 27 / 06
Name (Print or Type)	Title (Print or Type)	
Robert C. Schroeder	Manager	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		inn i dela Persi			APPENDIX			Т.	<u> </u>	
1	2		3		4				ification	
	Intend to non-accinvestors (Part B-l	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Membership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL								<del> </del>		
AK	•		ļ	<u> </u>				<u> </u>		
AZ										
AR									- <del></del>	
CA		X	\$3,743,270.00	1	\$100,000.00				X	
СО		X	\$3,743,270.00	1	\$50,000.00				X	
CT		X	\$3,743,270.00	1	\$150,000.00			_		
DE						<del> </del>			<u> </u>	
DC						-			X	
FL		X	\$3,743,270.00	2	\$200,000.00			<del></del>	^	
GA				<u> </u>						
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IA		1 37	\$3,743,270.00	1	\$400,000.00				X	
KS		X	\$3,743,270.00	<del>                                     </del>	\$400,000.00				<del>                                     </del>	
KY	ļ	<b>-</b>		+				<u> </u>	<del>                                     </del>	
LA	<del> </del>	X	\$3,743,270.00	1 1	\$78,270.00	<del>                                     </del>			X	
ME	<u> </u>	^_	\$3,743,270.00	<del>                                     </del>	ψ/0,2/0.00	1				
MD MA		+								
MI	<del> </del>	X	\$3,743,270.00	1	\$200,000.00				X	
MN	<del>                                     </del>	+	02,7,10,27,0100							
MS		+	+	+						
MO	<del> </del>	X	\$3,743,270.00	1	\$25,000.00				X	
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NV	<del>                                     </del>	<del></del>								
NH	+									
NJ	<del>                                     </del>	X	\$3,743,270.00	1	\$100,000.00				X	
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NY	1	X	\$3,743,270.00	11	\$1,430,000.00				X	
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					Mary Company	COTOS O CONTRACTOR DE LA CONTRACTOR DE L	6 22 S	340 - 154.0 T	5
1	Intendent to non-actinvestors	to sell credited in State	Type of security and aggregate offering price offered in state		Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	(Part B-	Item 1)	(Part C-Item 1)  Membership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
PA		X	\$3,743,270.00	7	\$810,000.00				X
RI									
SC								<u> </u>	
SD									
TN									<u> </u>
TX									<u> </u>
UT									
VT									
VA									
WA				<u> </u>					
WV									X
WI		X	\$3,743,270.00	1 .	\$100,000.00		-	<del> </del>	<del>  ^</del>
WY									
PR							<u></u>		<u> </u>